FORM D

UNITED STATES SECURITIES AND EXCHANGE TOMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURETIES PURSUANT TO REGULATION D; SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION



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A. BASIC IDE	NTIFICATIO	ON DATA					
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ent and name has chan	ged, and indica	ate change.)					
Address of Executive Offices (Number and Street, City, State, Zip Code)				Telephone Number (Including Area Code)			
San Jose, C	CA 95134		(408) 3	(408) 382-5200			
(Number and St	reet, City, Sta	te, Zip Code)	Telepho	Telephone Number (Including Area Code)			
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nership, already formed	j t	other (please sp	ecify):				
nership, to be formed				JL	JL 28 2004		
<u>N</u>	Aonth				THOMSON Z		
ganization: 0	2 9	9	☑ Actual	☐ Estimated	PINANCIAL		
	-						
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:							
CN for Canada; FN fo	or other foreig	n jurisdiction)	DE				
	A. BASIC IDE INTERPORT A. BASIC IDE INTERPORT AND	A. BASIC IDENTIFICATION The sent and name has changed, and indicated and street, City, Star San Jose, CA 95134 (Number and Street, City, Star San Jose, CA 95	A. BASIC IDENTIFICATION DATA ner ent and name has changed, and indicate change.) (Number and Street, City, State, Zip Code) San Jose, CA 95134 (Number and Street, City, State, Zip Code) mership, already formed mership, to be formed Month Year ganization: 0 2 9 9	A. BASIC IDENTIFICATION DATA Determent and name has changed, and indicate change.) (Number and Street, City, State, Zip Code) San Jose, CA 95134 (Number and Street, City, State, Zip Code) Telepho (408) 3 (Number and Street, City, State, Zip Code) Telepho Telepho Determine the companies of the companie	A. BASIC IDENTIFICATION DATA Determent and name has changed, and indicate change.) (Number and Street, City, State, Zip Code) San Jose, CA 95134 (Number and Street, City, State, Zip Code) Telephone Number (Indexes) (Number and Street, City, State, Zip Code) Telephone Number (Indexes) PR Determine the formed of the please specify: Determine the formed of the please spec		

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6-02)

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A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer: Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ☐ Beneficial Owner ☑ Executive Officer Check Box(es) that Apply ☐ Promoter ☐ General and/or Managing Partner Full Name (Last name first, if individual) Wurtz, Bradford S. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Caspian Networks, Inc. 170 Baytech Drive, San Jose, CA 95134 ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer ☑ Director Check Box(es) that Apply ☐ General and/or Managing Partner Full Name (Last name first, if individual) Krause, L. William Business or Residence Address (Number and Street, City, State, Zip Code) c/o Caspian Networks, Inc. 170 Baytech Drive, San Jose, CA 95134 Check Box(es) that Apply ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Roberts, Lawrence Business or Residence Address (Number and Street, City, State, Zip Code) c/o Caspian Networks, Inc. 170 Baytech Drive, San Jose, CA 95134 ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Check Box(es) that Apply Managing Partner Full Name (Last name first, if individual) Mishra, Prabhat Business or Residence Address (Number and Street, City, State, Zip Code) c/o Caspian Networks, Inc. 170 Baytech Drive, San Jose, CA 95134 Check Box(es) that Apply ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Schloss, Eileen Business or Residence Address (Number and Street, City, State, Zip Code) c/o Caspian Networks, Inc. 170 Baytech Drive, San Jose, CA 95134 ☐ Beneficial Owner ☐ Executive Officer ☑ Director Check Box(es) that Apply ☐ Promoter ☐ General and/or Managing Partner Full Name (Last name first, if individual) Liddle, David. Business or Residence Address (Number and Street, City, State, Zip Code) c/o US Venture Partners, 2735 Sand Hill Road, Menlo Park, CA 94025

☐ Beneficial Owner ☐ Executive Officer

☑ Director

☐ General and/or

Managing Partner

Check Box(es) that Apply

Morgenthaler, Gary

Full Name (Last name first, if individual)

☐ Promoter

Business or Residence Address (Number and Street, City, State, Zip Code)

c/o Morgenthaler Partners, 2710 Sand Hill Road, Suite 100, Menlo Park, CA 94025

Check Box(es) that Apply	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, Walrod, David B.	if individual)				
Business or Residence Add c/o Oak Associates, 525 U					
Check Box(es) that Apply	☐ Promoter	☐Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, Young, Philip M.	if individual)				
Business or Residence Add c/o US Venture Partners,					
Check Box(es) that Apply	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, New Enterprise Associate		entities			
Business or Residence Add 2490 Sand Hill Road, Men			Code)		
Check Box(es) that Apply	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, The K. William Sickler an	,	r Trust Dated 7/16/92,	K. William Sickler and	d Gail A. Sickler	Trustees
Business or Residence Addi 14665 La Rinconada Drive			Code)		
Check Box(es) that Apply	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, US Ventures Partners and		es		_	
Business or Residence Adda 2735 Sand Hill Road, Men	,		Code)		
Check Box(es) that Apply	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, Morgenthaler Partners an		ries			
Business or Residence Addr 270 Sand Hill Road, Suite			Code)		
Check Box(es) that Apply	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, Oak Investment Partners		tities			
Business or Residence Addr 525 University Avenue, Su			Code)		
Check Box(es) that Apply	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number and	d Street, City, State, Zip	Code)		
Check Box(es) that Apply	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number and	1 Street, City, State, Zip	Code)	<u>, , , , , , , , , , , , , , , , , , , </u>	
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					B. I	NFORM	ATION A	ABOUT (OFFERIN	G				
······													Yes	No
1.	Has the i	ssuer sol	d, or does	the issuer	intend to	sell, to no	n-accredi	ted invest	ors in this	offering?				Ø
			Answ	er also in .	Appendix	, Column	2, if filing	g under UI	LOE.					
2.	What is	the minir	num inve	stment tha	t will be a	ccepted f	rom any i	ndividual?	?				\$_N	I/A
													<u>Yes</u>	<u>No</u>
													abla	
4.	or similar listed is of the br	ir remune an associ oker or d	eration for ated perso lealer. If	solicitation or agen	on of pure t of a brok five (5) p	chasers in ker or dea persons to	connection ler registe	on with sa red with t	les of sect he SEC ar	urities in 1 nd/or with	the offering a state or	tly, any commission g. If a person to be states, list the name or dealer, you may	; ;	
Full N	ame (Last	name firs	t, if indivi	dual)										_
Busine	ess or Resi	dence Ad	dress (Nur	nber and S	Street, City	, State, Zi	p Code)							
			`											
Name	of Associa	ited Broke	er or Deale	er										
States	in Which	Person Li	sted Has S	olicited or	Intends to	Solicit Pu	ırchasers							
(Ch	eck "All S	tates" or	check indi	vidual Stat	es)			•••••		•••••				States
[AL		_	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL] [M]		[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full N	ame (Last	name firs	t, if indivi	dual)									1	
Busine	ess or Resi	dence Ad	dress (Nur	nber and S	treet, City	, State, Zip	Code)							
Name	of Associa	ted Broke	er or Deale	er										
States	in Which	Person Li	sted Has S	olicited or	Intends to	Solicit Pu	rchasers							
(Ch	eck "All S	tates" or o	heck indi	vidual Stat	es)					*************		(⊐ All S	States
[AL		[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
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[RI]		[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full N	ame (Last	name firs	t, if individ	dual)										
Busine	ss or Resi	lence Ado	iress (Nun	nber and S	treet, City,	, State, Zip	Code)							
Name	of Associa	ted Broke	r or Deale	r										
States	in Which I	Person Lis	ted Has S	olicited or	Intends to	Solicit Pu	rchasers							
(Ch	eck "All S	tates" or o	heck indiv	vidual State	es)					·····			⊐ All S	States
[AL [IL]		[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]		
[MT [RI]	[NE]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box □ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Aggregate Amount Already Offering Price Sold Equity \$ ☐ Preferred ☐ Common 20,800,000 \$ Partnership Interests \$_____ Total \$____ 20,800,000 \$ 20,800,000 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Number Aggregate Investors Dollar Amount of Purchases Accredited Investors.... 20,800,000 Non-accredited Investors. \$ Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1. Type of Dollar Amount Type of offering Security Sold Rule 505.....__ N/A \$ N/A Regulation A..... N/A N/A \$ N/A \$ N/A Total N/A \$ N/A 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs....

Legal Fees

Accounting Fees

Engineering Fees

Sales Commissions (specify finders' fees separately)

Total......

\$ 65,000

65,000

Other Expenses (identify)

C. OFFERING PRI	CE, NUMBER OF INVESTORS, EXPEN	SES AN	D USE OF PROCE	ED2		
total expenses furnished in response to Pa	ate offering price given in response to Part C art C – Question 4.a. This difference is the	e "adjust	ed gross		\$	20,735,000
each of the purposes shown. If the amount	gross proceeds to the issuer used or propost for any purpose is not known, furnish an estotal of the payments listed must equal the Part C - Question 4.b above.	timate ar	nd check			
			Payments to Officers, Directors & Affiliates			yments to Others
Salaries and fees		🗆	\$	_ 🗆	\$	
Purchase of real estate		🗆	\$	_ 🗆	\$	···
Purchase, rental or leasing and installati	on of machinery and equipment	🗆	\$		\$	
Construction or leasing of plant building	gs and facilities	🗆	\$	_ 🗆	\$	
offering that may be used in exchange f	ng the value of securities involved in this or the assets or securities of another issuer	🗆	\$		\$	
Repayment of indebtedness		🗖	\$		\$	
Working capital		🗆	\$		\$	20,735,000
Other (specify):		□	\$	_ 🗆	\$	
			\$	_ 🗆	\$	
			\$	abla	\$	20,735,000
Total Payments Listed (column totals ac	ided)		☑ \$_	20,73	<u>5,000</u>	_
		- ,			_	
	D. FEDERAL SIGNATURE					
The issuer has duly caused this notice to be signature constitutes an undertaking by the issuer formation furnished by the issuer to any non-	suer to furnish to the U.S. Securities and Ex	change (Commission, opon w	nder R ritten r	ule 505, equest o	the following of its staff, the
ssuer (Print or Type) Caspian Networks, Inc.	Signature		282	Date July 1	4, 2004	
lame of Signer (Print or Type) Bradford S. Wurtz	Title of Signer (Print or Type) Chief Executive Officer					

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)